FORM DP-87 WE

NEW HAMPSHIRE DEPARTMENT OF REVENUE ADMINISTRATION BUSINESS TAXES COMBINED

-	755			REPORT (OF CH	IANGE FOR	R IRS AD	JUSTM	ENT ONL	_Y	F	OR DRA USE ONL	v	
For the CA	ALEN	IDAR	year c	r other taxable	period	beginning	o Day Yea	ar	nd ending_	Mo Day			.1	
This form i an Internal	s to t Rev	oe us enue	ed to report any cha Service Examination	ange to the New	v Hamps e a copy	shire Business I	Profits and/o	r Busines	s Enterprise on USE TH	Tax retur	ns cau	sed by a final o	determination o	
STEP 1 Print	NAN	/IE OF	CORPORATION	FEDERAL EMPLOYER IDENTIFIC OR DEPARTMENT IDENTIFICATION								ICATION NUMBER TION NUMBER		
or Type	NUM	1BER 8	& STREET ADDRESS											
	ADD	RESS	(Continued)											
	CITY/TOWN, STATE AND ZIP CODE													
STEP 2	1 GROSS BUSINESS PROFITS													
Figure Your Taxes		(a)	Combined Net In taken, Line 5 of (If negative, show in	Combined Sche	edule R	, as originally f	iled or prev	iously adi	usted		1(a))		
		(b)	Separate entity o											
		(c)	Subtotal [Line 1(a	a) adjusted by L	ine 1(b))]. (If negative,	show in par	renthesis.)		1(c))		
		٠,	Foreign Dividend			. , ,					٠,	<u> </u>)	
	2	(e)	New Hampshire [Line 1(c) adjuste STAL REVENUE STATE	Combined Net do by Line 1(d)]	Income]. (If ne STMEN	e as originally fi egative, show in I TS TO FEDER	iled or previ n parenthes AL INCOMI	iously adj is.) E (From P	usted age 2, Section	on 1, Lin	1(e) e 1) 2			
	3		erse IRS Adjustme						-					
	4 5	ADE	MBINED NET INCO DITIONS AND DEI As originally filed	DUCTIONS (RS	SA 77-	A:4)	-	, ,		-				
		. ,	As originally filed Adjustments to a		•						, ,			
		. ,	Adjustments to d		-						. ,	` 		
		. ,	Total adjusted ad		-						. ,			
	6	. ,	USTED GROSS BUS			-	, , , ,		-		, ,			
	7	NH A	APPORTIONMEN' ortionment percen	r PERCENTAG	E from	Form DP-80 e	expressed a	s a decim	nal to 6 place	es. If thi	s	-		
	8													
	8 NH WATER'S EDGE TAXABLE BUSINESS PROFITS (Line 6 x Line 7)													
	10			NESS PROFITS (Line 8 plus Line 9. If negative, enter zero)										
	1		BUSINESS PROFITS		•	•	-		*					
STEP 3 Figure	1		dits allowed unde		-									
Your Amount	1		ototal (Line 11 mir Γ Credit as origina	,										
Due	١		•	•	•	•								
	16	 15 Balance of Business Enterprise Tax due (Page 2, Section 4, Line F) [If Line F is NEGATIVE, ENTER ZERO] 16 NH Business Profits Tax Net of Statutory Credits as originally filed or previously adjusted 												
	17 Balance of tax due (Line 13 minus Line 14 plus Line 15 minus Line 16)								-					
	18		rest due (see DP-					*						
	19		ance due (Line 17											
	20		und due [If Line 1										1	
		1101	and ddo [ii Eiiio i											
			enalties of perjury, other than the taxp										prepared by a	
FOR DRA	USE C	DNLY	X					X						
			SIGNATURE (IN INK)	OF TAXPAYER			DATE		RE (IN INK) OF	PREPAREF	ROTHER	R THAN TAXPAYE	R DATE	
PRINT SIGNAT		PRINT SIGNATORY N					PRINT PREPARER'S NAME & IDENTIFICATION NUMBER							
			TO: NH DRA AUDIT D PO BOX	IVISION					R ADDRESS					
				RD, NH 03302-	0457			CITY/TOV	/N, STATE AND	ZIP CODE				



NEW HAMPSHIRE DEPARTMENT OF REVENUE ADMINISTRATION BUSINESS TAXES COMBINED GROUP

REPORT OF CHANGE FOR IRS ADJUSTMENT ONLY

Page 2

		Page 2							
		S ADJUSTMENTS TO INCOME							
	the number Ederal	er of adjustments exceed the lines provided, attach a schedule and summarize	on Line E. AMOUNT ORIGINALLY	AMOUNT	BALANCE				
	ORM	ADJUSTMENT DESCRIPTION	REPORTED	OF CHANGE	AFTER CHANGE				
-									
В									
C -									
D									
E		Total from attached schedule							
Line	1 Enter t	otal of Lines A through E here and on Page 1, Line 2	1						
		S ADJUSTMENTS TO ADDITIONS							
N	H RETURN	er of adjustments exceed the lines provided, attach a schedule and summarize	AMOUNT ORIGINALLY	AMOUNT	BALANCE				
ΑГ	LINE NO.	ADJUSTMENT DESCRIPTION	REPORTED	OF CHANGE	AFTER CHANGE				
⊢									
В									
C									
E		Takel Gran attack and ask adula							
٦L		Total from attached schedule							
Line	2 Enter t	otal of Lines A through E here and on Page 1, Line 4(b)	2						
<u></u>	TION 2 IF	RS ADJUSTMENTS TO DEDUCTIONS							
		er of adjustments exceed the lines provided, attach a schedule and summarize	on Line E.						
	H RETURN LINE NO.	ADJUSTMENT DESCRIPTION	AMOUNT ORIGINALLY REPORTED	AMOUNT OF CHANGE	BALANCE AFTER CHANGE				
Α									
В									
С									
D									
E		Total from attached schedule							
Line	3 Enter t	otal of Lines A through E here and on Page 1, Line 4(c)	3						
	TION 4 IF	OO AD ILIOTMENTO TO DIJONEGO ENTERDRIGE TAV							
_		RS ADJUSTMENTS TO BUSINESS ENTERPRISE TAX							
-	NH Taxable Enterprise Value Tax Base (TEVTB) as originally filed or previously adjusted (BET-PROP Line 4)								
-	Internal Revenue Service adjustments to TEVTB (attach revised BET and/or BET-80)								
-	NH TEVTB as adjusted by IRS Adjustments (Line A adjusted by Line B)								
-	NH Business Enterprise Tax as adjusted by IRS Adjustments (Line C x tax rate, see DP-87 instructions)								
Е	NH Business Enterprise Tax as originally filed or previously adjusted								
F	Balance of Business Enterprise Tax due (Enter amount on Page 1. Line 15. If NEGATIVE ENTER ZERO on Line 15.								